

REPORTS OF MEDICAL SOCIETY MEETINGS.

Humboldt County.

The regular meeting of the Humboldt County Medical Society was held in Eureka, Tuesday evening, July 14, Dr. Felt presiding.

The committee appointed to draft a fee bill brought in a partial report and were given time in which to complete their work.

Dr. G. N. Drysdale reported a case of amputation at the hip joint by Wyette's method, for tubercular osteomyelitis. The disease, beginning at the knee, had extended up to the head of the femur; acetabulum was not involved; recovery was uneventful and patient was out on crutches in four weeks; wound completely healed.

Dr. McKibbin reported a case of puerperal septicemia occurring eleven days after labor.

Dr. J. J. Gaynor read a paper on "The Use of Ergot During Labor." He said that ergot had practically no place in the management of a case of labor. In the first stage he never used it; in the second stage he never used it, with the single exception of the birth of the second child in twin births. He considered the third stage better completed without ergot. Its use was liable to retard or prevent the natural delivery of the placenta and render manual extraction necessary. His custom was to use an aseptic preparation of ergot hypodermatically, after the completion of the third stage, not so much as a prophylactic against hemorrhage, but because it lessened after-pains.

Dr. H. G. Gross read a paper on "The Management of Compound Fractures." He said that the lumbering industry in this county gave us an unusual number of these injuries. The shingle saws, cogwheels and cable spools were responsible for most of the compound fractures of the fingers and hands. He believed in the conservative treatment of these injuries. Where a man would rather lose a finger than lose time, and made the choice himself, it was well enough to amputate; but amputation was seldom necessary when there was not complete death of the part. He used sutures when needed, being careful not to close the wound too tightly; splints when necessary, and a moist dressing when there was contusion, giving the patient some mild antiseptic solution with which to keep the dressing moist. In fractures of the toes, rest was the most important part of the treatment. Fractures of the bones of the leg were common and hard to handle. He did not believe in wiring if he could avoid it. In the majority of cases, free incision, thorough cleansing, removal of loose fragments, bringing the broken ends in apposition, a heavy dressing, completed with plaster of paris, gave the best results. Cellulites called for energetic treatment, with free incisions, but he did not give up the idea of union unless amputation were necessary to save life. Compound fractures of the thigh were apt to be severe and hard to manage. Posterior splints, slight traction, and if suppuration occurred, perfect drainage would do the work for the majority of cases. He cited a case occurring in his practice in which there was extensive laceration of the thigh, a mass six inches long and extending around three-fifths of the circumference of the thigh sloughed out. The anterior crural nerves lay on the bed of the cavity; the femoral artery hung like a cable, unsupported for six inches; the ends of the bone were exposed at the bottom of the cavity, and the leg hung by the fascia lata. The man had a hard struggle, but to-day had a leg, stiff at the knee, but a good deal

better than a wooden one. It took nearly five years to get this result, but it taught him what conservative surgery would accomplish. Compound fractures of the arm called for much the same treatment as those of the leg, except that in the upper arm he found the ideal place for wiring. He considered that in no class of cases were the results of modern surgery more brilliant than in compound fractures.

Discussion of the papers was taken part in by Drs. Felt, Wallace, McLaren, Gross, Loofbourrow, Perrott, Sinclair, McKibbin, Gaynor and Drysdale.

The regular meeting of Humboldt County Medical Society was held at Eureka, Tuesday evening, August 11, Dr. R. Felt presiding. At the July meeting it was resolved to hold meetings of the society in towns outside of Eureka twice a year, and in accordance with this resolution it was decided to hold the September meeting in Ferndale.

Interesting clinical cases were reported by Drs. Wallace, H. G. Gross, Gaynor and Drysdale. An interesting case was reported by Dr. Felt, of a woman who called to see him, saying she was pregnant about three months and thought she would miscarry, having had pains for several days and considerable flowing. On examination it was found that abortion was inevitable, and on attempting to dilate the cervix several hemorrhages followed. The vagina was packed temporarily and further investigation revealed a rent in the posterior lip of cervix, at vaginal junction, large enough to admit three fingers. Later inquiry elicited the fact that the woman had tried to produce an abortion herself, using a bougie, and instead of introducing it into the os, had punctured the posterior lip of cervix. Infection followed, with sloughing, and the hemorrhage was due to sloughing of circular artery. The uterus was emptied, and recovery followed.

Paper was read by Dr. E. J. Hill, county health officer, on "Preventive Medicine," dealing particularly with the smallpox epidemic in this county. He saw the recent outbreak of smallpox amongst the Indians here, and demonstrated the value of vaccination as a preventive measure. The cases amongst the Indians who had not been vaccinated at all, being of a much more severe form. He spoke also of the prejudice that exists among the people here against vaccination, and the danger that may arise from it.

In the discussion which followed, many instances were cited of cases in which the value of vaccination was clearly demonstrated.

G. N. DRYSDALE, Secretary.

San Diego County.

At the regular meeting of the San Diego County Medical Society, August 7, President Fred Baker in the chair, the membership committee reported favorably on the application of Dr. J. M. Steade to become a member, and he was duly elected.

Dr. Magee read a paper on "Puerperal Infection," based on a recent case of puerperal pyemia. He prefaced his report by stating that in the present day of antiseptics, cases of puerperal infection were considered due to some neglect on the part of the attendants in carrying out those regulations as to cleanliness, known and practised by all careful surgeons, and affirmed that under the most exact methods of antiseptics an occasional case of infection would arise. Also the converse of this was true; that many cases with the most unsanitary surroundings,

with no regard, whatever, for asepsis, passed an uneventful puerperium.

The doctor spoke of the three phases of infection, sapremia, septicemia and pyemia, giving their differential diagnostic phases. He then reported a case from his own practice, of a primipara with tedious labor and instrumental delivery in which the patient did well until the seventh day, when she was suddenly seized with a violent chill, followed by a rapid rise in temperature to 104.05° F., succeeded by drenching perspiration and temperature sinking to subnormal, with recurring paroxysms of the same character at irregular intervals. After the second chill the doctor gave 10 cc. antistreptococcus serum every six hours until 40 cc. had been administered, the result being an arrest of the paroxysms, and a continuous improvement and a complete recovery.

Drs. Burnham, Dolg, Gochenaur and others discussed the paper, dwelling particularly upon the apparent good results from the use of the serum in the case.

THOS. L. MAGEE, Secretary.

San Francisco County.

The regular monthly meeting of the San Francisco County Medical Society met in the parlors of the Y. M. C. A. on Tuesday evening, August 11, President Kengla presiding.

Dr. A. B. Grosse read a paper on the "Treatment of Lupus Erythematosus and Report of Case" (to be published in the JOURNAL).

The reading of a paper, "An Interesting Case of Brain Surgery," by Dr. George Goodfellow, was postponed on account of the author's absence from the city.

Dr. R. D. Cohn read his paper on "Acute Radiating Parenchymatous Keratitis—Demonstration of Case," which he had prepared and read before the State Society at its April meeting at Santa Barbara.

The committee appointed to prepare a memorial minute on the death of Dr. Matthew Gardner, reported the following:

"San Francisco, August 11, 1903.

"To San Francisco County Medical Society—Your committee on memorial to the late Dr. Matthew Gardner respectfully reports as follows:

"With bowed heads and sad hearts, we deplore his sudden and untimely demise.

"Though the inception of his professional career was as an obscure and comparatively unknown rural physician, he soon rose to eminence and distinction, and even before he had attained the full bloom of middle age he became the chief surgeon of the Hospital Association of the Southern Pacific Company.

"The responsibilities of such a position require tact, energy, medical ability and surgical skill, together with executive capacity. Nature seemed to have endowed Dr. Gardner with all these qualities.

"When we see a person ambitious, industrious, able, frank, firm, self-reliant and confident, we cannot refrain from admiring him; but there was one phase of Dr. Gardner's character that particularly commends him to the warmest esteem, and that was his indulgent consideration for, and kindly forbearance with, and toward young members of his profession. When meeting an older man who has gained professional character and distinction, the youthful medico is, perforce, timid and awed, and frequently loses that nerve so necessary to success; but with Dr. Gardner he was immediately made to feel at ease.

"He had ever present before him his own early struggles. Experience had taught him that with youth the world is skeptical of ability, and with those ideas uppermost in mind, he never failed to

encourage and reassure the young man, and always consulted and advised with and deferred to his opinion and judgment, with as much alacrity and consideration as he would with older and presumably more learned doctors.

"Viewed as a whole, his life and career can be exemplified in the words, 'Well done, thou good and faithful servant.'

"When we are called to answer the last summons which shall bid us take our place in the silent halls of eternity, let us hope that when the reckoning shall be made, we will be found, like him, in the ranks of faithful service, and then, as may be said of him, so will it be said of us, that our lives were good; that in our departing moments we may be sustained and soothed by a consciousness that in passing unto death we have fulfilled our allotted portion and duty in life.

"W. B. COFFEY, Chairman."

Amendment proposed at the last meeting, to the Constitution and By-Laws, permitting residents of adjoining counties in which there are no county societies, to apply for membership in this society, was adopted.

An invitation was received from the University of California, to the members to attend the dedicatory exercises on Thursday, August 20, of the new physiological laboratory.

San Francisco Society of Eye, Ear, Nose and Throat Surgeons.

The monthly meeting of the San Francisco Society of Eye, Ear, Nose and Throat Surgeons was held on April 16th, 1903, President Deane in the chair.

Dr. Cohn—"Tuberculosis of the Larynx." Family history gave no tuberculosis. Two months ago the trouble began with hoarseness. There is now a circumscribed ulceration of the right cord. I have shown this as a typical case in which we have the hope of curing the patient. Shall use a 50 or 60 per cent solution of lactic acid after curetting.

Dr. Payne—I have had but two cases of tuberculosis of the larynx in which I have used it. Neither was primary. In one case I curetted thoroughly and used 25 per cent lactic acid. The reaction was very severe and general condition grew worse. In the second one I followed the same plan, using 50 per cent lactic acid solution, with temporary benefit. I do not feel encouraged to repeat this treatment and do not think I will resort to it again, especially where the process is not primary.

Dr. Deane—I appreciate what has been said in regard to curettement and the use of lactic acid, but I wish to mention also the use of creosote. I look back on my most successful cases and they are those on whom I have used creosote internally, beginning with small doses and run up to 8 to 18 drops three times a day; also locally by inhalation of creosote vapor heated to about 300° F.

Dr. Cohn—As I implied before, there are three stages of tuberculosis of the larynx. The first is the early stage where the curettement and lactic acid may be successful, and before the ulcers have become diffuse. Orthoform is of value in the second stage when you cannot hope to cure your patient. All you can do is keep the ulcers clean and secondary infection away. In the third stage the patient will have to have the throat cocaine or morphined. I think that we should always try to affect a radical cure, and the only time for a radical cure is in the beginning. If the ulcer has formed the curette should be used thoroughly, and then rub with lactic acid, using a 50 to 80 per cent solution.

Dr. Merritt showed a case of subacetate of lead deposited in the cornea of both eyes. About five years ago the patient was given a solution of subacetate of lead to drop in his eyes, as they were sore. The result of the treatment was a permanent deposit in the cornea of both eyes, which has remained ever since. The epithelium lies over it, leaving the surface smooth.

Dr. Martin—If it is a deposit of lead there are means of getting it out, but if it is an old infiltration it cannot be removed.

Dr. Franklin presented some new instruments for inspection. (1), a binocular electric head mirror (Clares) which can be readily focused; (2), Hajek's chisels for the septum; (3), Schulmeister's electric saw handles and saws; (4), a sliding scissors for removal of the turbinates.

The President—The subject for this evening's discussion is the evisceration of the globe. The subject can be divided into four divisions: First, the indications for the operation; second, the operative technique, and in this there is always something new as, for instance, whether the eye is simply left with a clot of blood in its interior, or the advantages of inserting a foreign substance, as a gold, silver, silver wire, or glass globe, sponge or paraffin; the method of keeping the scleral wound gapping, etc.; third, the after treatment, and much has been said as to the severe reaction following evisceration; fourth, the final results. Is the foreign substance retained? Is the eye painful? The chances of sympathetic ophthalmia, the cosmetic effects, etc.? None of us has had experience in all these lines, and that is why I bring up the subject, so that all may profit by the experience of others. I believe it to be the operation of the future in selected cases.

Dr. Payne—As regards the indications for the Mule's operation, I can speak from experience of ten or twelve cases, in which I have been very much pleased with the result. Of course it is simply the amputation of the anterior segment of the eye at the limbus, evisceration of the sclera, and the insertion of the glass ball. It is indicated wherever there is no infection or malignant disease within the globe, and may be used in recent penetration injuries where enucleation is done to prevent sympathetic trouble. In old cases, however, I will not resort to it, but up to this time I have used no other material than the vitrified glass ball for insertion into the sclera. The selection of the size of the ball is important. It should fit into the scleral cavity without any tension and still fill the cavity. Slitting the sclera a little at the interior and exterior canthus will allow one to coaptate the edges of the wound the better. As a rule, there is a great reaction after the operation. The lids swell, conjunctiva very edematous, and there is considerable pain for several days. Ice applied does not seem to prevent this. I used it in my first two cases, and although they came out favorably, of course, it was after a great deal of trouble and pain. To prevent this I now make a wall of cotton over the orbit, filling it in over the lids, so as to make a snug compress over the whole orbital opening, and then put on a snug flannel bandage. The more evenly this pressure is adjusted, the less the reaction, pain and swelling. Occasionally the patient requires a hypo of one-eighth or one-quarter of morphin the first few hours after the operation, but further than this I have had no trouble and the results have been excellent.

Dr. Deane—*Dr. Payne's* remarks have certainly been interesting and instructive. Would like to ask *Dr. Payne* if he has had any experience with the injection of paraffin. Could you bring some of your cases to one of our meetings?

Dr. Payne—In answer to the question as to the use of paraffin, I have had no experience with it, but I can understand how it might be very satisfactory to fill in the orbital cavity or the space behind the conjunctiva in an ordinary enucleation. The glass ball has been so satisfactory with me that I hesitate to use any other material; however, I may try the paraffin to fill up the sclera in the near future.

Santa Clara County.

A stated meeting of the Santa Clara County Medical Society was held on Wednesday, 19th inst.

The principal business was the consideration of the report of the committee appointed at the July meeting to investigate the causes leading to the recent suit to have that portion of the medical law relating to election of members of State Board of Medical Examiners by the three State Societies, declared unconstitutional. The report is based on sworn evidence submitted to the committee, and was discussed at length. The action of the instigators of the suit met with unanimous and unqualified condemnation.

Relative to the subject, the following resolution was unanimously adopted:

"Resolved, That this Society concurs in the report of its committee, and that a copy thereof be sent to the CALIFORNIA STATE JOURNAL OF MEDICINE for publication, as a public expression of the sentiment of the Society in this matter."

San Jose, Cal., August 19, 1903.

To the President and Members of the Santa Clara County Medical Society—After a careful investigation of those matters submitted to it, relative to the suit begun to oust the Board of Medical Examiners of the State of California, your Committee appointed at the July meeting to inquire into the causes leading to this action, if any there be, beg leave to report its findings as follows:

First. The original medical law of California was approved by the Governor and went into effect April 3d, 1876. It remained in force twenty-five years, or until the present law became effective, August 1st, 1901. The original law provided for the election of three State Boards of Medical Examiners by the three State Medical Societies, to wit: Regular, Homeopathic and Eclectic. The functions and duties of these boards were both judicial and ministerial. Judicial, as having power to inquire into the knowledge and capability possessed by non-graduates who might apply for license to practice; ministerial, in being compelled by the law to accept and indorse diplomas from applicants for license, no matter whether obtained in due course of study, or otherwise, so long as the college granting the diploma was listed by its representative State Board. The new law consolidated the three State Boards into one, composed of representatives from the Regular, Homeopathic and Eclectic State Medical Societies, and made an examination by the State Board compulsory for all graduates applying for license.

Second. The medical profession of the United States had for a long time demanded a higher standard of medical education. The countries of Europe refused to give the same standing to graduates of American colleges and universities that they did to those of their own. In fact, graduates from American medical institutions were prohibited from practicing their profession in Europe without first taking specified courses in its schools, while alien product was freely admitted to our shores. This condition of affairs, in a great measure, was due to the multiplicity of medical colleges in the United States, some of which were of the highest standard, many of mediocrity, while still others of the lowest; yet all chartered under the laws of the several states, with authority to confer the degree of "Doctor of Medicine," and issue diplomas therefor. California, with commendable pride, desiring to be with the advance in college requirements and education, took measures to remedy the defects in the old law which had retarded, if not absolutely prevented, any uplifting of professional standard in its own state. As a result, the present law was enacted, and the illiterate and unlearned cease to have a right to practice medicine by reason of holding a diploma; a certificate from the State Board of Medical Examiners being required, to enter upon the practice of medicine and surgery.

Third. The present law was passed by the Legislature of 1901, and went into effect without the then Governor's approval. It received the support of every ethical member of the profession and the three State Medical Societies. Notwithstanding this, certain parties who had con-

stituted themselves proprietors and trustees of a medical college in San Francisco, sought its defeat by personal attendance upon the Legislature during its consideration of the bill, fearing the disastrous consequences to their college by loss of students on account of the knowledge and skill required of the latter under the new law. The political influence of the president of that college with the Governor induced that executive to withhold his approval of the bill. The results dreaded by these opponents were afterward realized in the rejection, by the State Board, of seventy-four per cent of the graduates of that college who appeared for examination and were found to be incompetent. Chagrined at the failure of its graduates, the proprietors and trustees of that college, instead of improving its methods of instruction, correcting its irregularities, enforcing discipline and compelling study, endeavored to secure a repeal of that portion of the law which gave to the State Medical Societies the power to elect the members composing the State Board of Medical Examiners. For this purpose they secured the introduction of that infamous measure known as "Assembly Bill No. 129." Failing in this, several other bills were introduced as trailers, in hopes of securing the passage of one or another, whereby State examinations would be abolished, in whole or in part, and that the members of the State Board of Medical Examiners would be appointed by the Governor. It was expected that through the influence of the politicians in the Board of Trustees of the college referred to, and their political allies, some future Governor might be induced to appoint one or more members of the State Board whose pliability in the commercial interests of the college could be depended upon. Being again foiled in its schemes to dishonor the medical profession of California, the Board of Trustees of that college, through its representative at the State Medical Society convention, held in Santa Barbara in April last, attempted by bully and bluster to compel the Society to discredit and repudiate its Board of Medical Examiners. It is well known how this effort to outrage decency met with withering rebuke in that convention.

Fourth. It also appears that Dr. Winslow Anderson, now President of the College of Physicians and Surgeons of San Francisco, was a member of the State Board of Medical Examiners for the term of 1889-90. He was elected to that position in precisely the same manner as were the members of the present board, the legality of which is now assailed by his college. It is only after the failure of so many of his graduates in State examinations that it has been left to the acumen of his associate, the Dean, to discover that examining boards so elected have no legal existence.

Fifth. The suit now in court to oust the Board of Medical Examiners, is the expiring effort of the College of Physicians and Surgeons as now conducted. It seeks to destroy every safeguard which the people have a right to demand under medical legislation. Its first and only consideration is the selfish one of financial gain. While the plaintiff in the action is Dr. D. A. Hodghead, the fact that he is Dean of the college of which Dr. Winslow Anderson is president, has its own significance.

Sixth. These investigations have led your Committee to inquire into the conditions surrounding the College of Physicians and Surgeons of San Francisco. From evidence submitted, it appears that this institution was organized in the year 1896, as a purely medical college. Since that time it has been transformed into an omnibus concern, so that its graduates can receive almost anything from a medical diploma to a certificate in embalming a corpse. It is incorporated under an act relating to "colleges and seminaries of learning." It is the general opinion of those familiar with this statute that it is extremely vicious, inasmuch as it delegates arbitrary powers and permits abuses which the people of this State never intended should be possessed by any corporation. It provides that there shall not be more than fifteen trustees, nor less than five. The college, for reasons of its own, is contented with the lesser number. Under its charter the trustees re-elect themselves from year to year, perpetuating and constituting themselves sole owners and proprietors, while posing before the public simply as trustees. Neither the faculty, alumni, nor any other person, not even the Governor himself, nor any other officer of the State, can have any voice in the selection of trustees, nor a legal right to inquire into its conduct.

When first organized, and for three years thereafter, the college was controlled by its faculty, and the Board of Trustees were the executive branch. During this time its affairs were conducted in a creditable manner, and its students honestly instructed. In knowledge and practice they compared favorably with those of similar institutions. In fact, some of them have received high honors. But over this came a change. Preliminary education of matriculants was disregarded, the college increased in number of students and revenue. Prospective income, together with the notoriety of having a larger student body, was too tempting to be resisted. The trustees proposed to hold night classes, so that a large

number of dentists and veterinaries could attend and receive the degree of "Doctor of Medicine." To their credit, this was promptly vetoed by the faculty, some of whom afterward suffered for their temerity in opposing such a scheme to add to the coffers of the college. Some time after this, notices were sent out soliciting undertakers and others to take a course in embalming. Students were excused from attendance and work, one being given credit for full ninety days spent in the Legislature, a part of which time he was lobbying against the passage of the present medical law. He was graduated in regular course with the other members of his class. A Japanese was graduated in 1900 who could not speak, read or write English, his final examination being conducted through the medium of an interpreter. Members of the faculty protested in open meeting against admission to advanced standing of students from other colleges without examination by them in the subjects of their respective chairs, but were overruled by the trustees, the Dean telling the professors that if they did "not like it they could get out of the college." Fearing the faculty might reject students whom the trustees desired to graduate, the professors and teachers were directed by a written and arbitrary order of the Board of Trustees, of date of May 20th, 1901, to turn over to it all examination papers as soon as completed, with the professor's markings thereon for "its final inspection and action." This practice still continues in that college. It should here be stated that this Board of Trustees consists of five members, three doctors of medicine and two dentists, who thus pass upon the qualifications of all students without regard to their standing with their professors and teachers.

Faculty meetings were abolished by the Board of Trustees in July, 1901, since which time no meeting of professors and teachers has been permitted to be held, nor have they been allowed any voice in passing or rejecting candidates for graduation. Professors who have been identified with the organization of the college, objected to this abolishment of their right, privileges, and to other flagrant abuses of power by the Board of Trustees. For their remonstrance all had their interests, labors, and sacrifices confiscated to the "College," and some were turned out of doors. Others, not wishing to be participants in the dishonorable practice of the new governing body, have resigned from the school, so that there is not one member of the original faculty of over fifty professors and instructors remaining in that college, except the three doctors and two dentists who compose its "Trustees."

Your Committee, therefore, find that the general reputation of the College of Physicians and Surgeons, as now conducted, is extremely savory in all its departments. There seems to be no law of the State to prevent the evils and abuses enumerated.

Under its charter its Board of Trustees can legally confer the degrees of M. D., D. D. S. and Ph. G. on any person, without regard to competency, skill or attendance. It is amenable to no law for doing so. It knows it and profits by it.

Reviewing this statement, your Committee would ask: "Is it any surprise that graduates of that college failed in far greater proportion than others, in their examination by the State Medical Board?" Is it not a greater surprise that any of its graduates succeeded in passing? Evidence shows the State examinations to be impartial and honest. Every examination paper is on file and open to inspection. The personality of candidates, and schools from which they came, being unknown to the examiners, bias or prejudice was impossible. Students from other institutions answered questions correctly to which exceptions were taken by rejected candidates, backed by the President and Dean of the College of Physicians and Surgeons. Hence the query arises, why have not its students received up-to-date instruction?

From the foregoing, it is not difficult to discover and comprehend the animus of the plaintiff in his action in court to oust the Board of Medical Examiners.

In their desperation, he and his associates have endeavored to falsify the etiology and diagnosis of the disease, by a resort to civil courts, rather than to work a cure of the malady by fumigation of their own household.

F. H. PATERSON,
J. F. BURNS,
LINCOLN COTHRAN,
Committee.

On the evening of Sunday, August 2, the wife of Dr. P. M. Lusson died suddenly, having been a sufferer for a number of years from organic heart trouble. The severe earthquake shock on that date so startled her that the effect proved fatal. Mrs. Lusson held a prominent position in San Jose, where Dr. Lusson is one of the most eminent physicians,

and an honored member of the county medical society.

Mrs. Lusson came from a fine Southern family, was a member of the Daughters of the American Revolution and other patriotic orders. She was active in church and all charitable work, a member of the Ladies' Needlework Guild of America, and other societies.

J. LAMBERT ASAY,
Secretary.

STATE BOARD OF MEDICAL EXAMINERS.

July and August Examinations.

In July the State Board of Medical Examiners held an examination in San Francisco and Los Angeles, simultaneously; in August an examination by the Board was held in San Francisco. The following table gives a summary of these examinations: "F" indicates that the candidate failed; "C" that he was conditioned in some one or more subjects, though generally the condition was in pathology; where nothing is indicated, the candidate has passed. A more careful analysis of the data here given will be published at some future date.

San Francisco, July 7th, 8th, and 9th.

College.	Date Graduation.	Percent-age.	
Cooper Medical College.....	1903	85 $\frac{1}{2}$%	.....
" " " ".....	1903	86 $\frac{2}{3}$%	.....
" " " ".....	1903	84	.....
" " " ".....	1903	81 $\frac{1}{2}$%	.....
" " " ".....	1903	79 $\frac{1}{2}$%	.....
" " " ".....	1902	84 $\frac{1}{2}$%	.....
" " " ".....	1902	91 $\frac{1}{2}$%	.....
" " " ".....	1903	80 $\frac{1}{2}$%	.....
" " " ".....	1903	81 $\frac{1}{2}$%	.....
" " " ".....	1903	82 $\frac{1}{2}$%	.....
" " " ".....	1903	80 $\frac{1}{2}$%	.....
" " " ".....	1902	82 $\frac{1}{2}$%	.....
" " " ".....	1903	77 $\frac{1}{2}$%	.....
" " " ".....	1903	84 $\frac{1}{2}$%	.....
" " " ".....	1903	86 $\frac{2}{3}$%	.....
" " " ".....	1903	85 $\frac{1}{2}$%	.....
" " " ".....	1903	85 $\frac{1}{2}$%	.....
College of Physicians and Surgeons	1902	78 $\frac{1}{2}$%	.....
" " " ".....	1902	76 $\frac{2}{3}$ %	C.
" " " ".....	1902	84 $\frac{1}{2}$%	.....
" " " ".....	1902	82 $\frac{1}{2}$%	.....
" " " ".....	1902	70 $\frac{1}{2}$ %	F.
" " " ".....	1903	83 $\frac{1}{2}$%	.....
" " " ".....	1902	84 $\frac{1}{2}$%	.....
University of California.....	1902	78 $\frac{1}{2}$%	.....
" " " ".....	1903	84 $\frac{1}{2}$%	.....
" " " ".....	1903	83 $\frac{1}{2}$%	.....
" " " ".....	1903	81 $\frac{1}{2}$%	.....
" " " ".....	1902	84 $\frac{1}{2}$%	.....

Los Angeles, July 7th, 8th, and 9th.

University of Southern California	1903	88 $\frac{2}{3}$%	.....
" " " ".....	1903	80 $\frac{1}{2}$%	.....
" " " ".....	1903	84 $\frac{1}{2}$%	.....
" " " ".....	1903	79 $\frac{1}{2}$%	.....
" " " ".....	1903	79 $\frac{2}{3}$%	.....
" " " ".....	1903	89 $\frac{1}{2}$%	.....
" " " ".....	1903	79 $\frac{1}{2}$%	.....
" " " ".....	1903	79 $\frac{1}{2}$%	.....
" " " ".....	1903	79 $\frac{2}{3}$%	.....
" " " ".....	1903	75 $\frac{1}{2}$%	.....
" " " ".....	1903	81 $\frac{1}{2}$%	.....
" " " ".....	1903	82 $\frac{2}{3}$%	.....
" " " ".....	1903	79 $\frac{1}{2}$%	.....
" " " ".....	1903	84 $\frac{1}{2}$%	.....
" " " ".....	1903	78 $\frac{1}{2}$%	.....

Los Angeles, July 7th, 8th, and 9th.

College.	Date Graduation.	Percent-age.	
University of Southern California	1903	83 $\frac{1}{2}$%	.....
" " " ".....	1903	84 $\frac{1}{2}$%	.....
" " " ".....	1903	79 $\frac{2}{3}$%	.....
" " " ".....	1903	83	.....

MISCELLANEOUS.

(San Francisco)

University Basle, Switzerland.....	1902	73 $\frac{1}{2}$ %	F.
California Medical College.....	1903	80 $\frac{1}{2}$ %	C.
Rush Medical College, Chicago.....	1881	71 $\frac{1}{2}$ %	F.
California Medical College.....	1903	74	F.
Loral University, Quebec.....	1901	69 $\frac{2}{3}$ %	F.
Apothecaries Hall, Ireland.....	1899	75 $\frac{1}{2}$ %	C.
Johns Hopkins University, Md.....	1903	94 $\frac{1}{2}$%	.....
University of Minnesota.....	1902	80 $\frac{1}{2}$%	.....
Tufts College, Massachusetts.....	1901	71 $\frac{1}{2}$ %	F.

(Los Angeles)

University of Illinois.....	1901	73 $\frac{1}{2}$ %	F.
Harvard University, Massachusetts	1901	87 $\frac{1}{2}$%	.....
Medical School of Maine.....	1892	77 $\frac{1}{2}$ %	C.
Tulane University, Louisiana.....	1899	72 $\frac{2}{3}$ %	F.
College of Physicians and Surg., Ill.	1902	75 $\frac{1}{2}$%	.....
Columbia University, New York ...	1889	83 $\frac{1}{2}$%	.....
Columbia College, New York.....	1900	88 $\frac{1}{2}$%	.....
University Vienna, Austria.....	1891	74	F.
Western Reserve University, Ohio	1900	83 $\frac{1}{2}$%	.....
Washington University, Missouri...	1900	79 $\frac{2}{3}$%	.....
Chicago Homoeopathic Coll., Ill....	1892	65 $\frac{1}{2}$ %	F.
Bellevue Hospital College.....	1889	44 $\frac{1}{2}$ %	F.
Medical College of South Carolina	1884	80 $\frac{1}{2}$%	.....
Kentucky School of Medicine, Ky.	1885	79 $\frac{1}{2}$%	.....
Jefferson Medical College, Pa.....	1875	75 $\frac{1}{2}$%	.....
Saginaw Valley Med. Coll., Mich...	1901	77 $\frac{1}{2}$%	.....
University of Colorado.....	1897	79 $\frac{1}{2}$%	.....
Detroit Medical College, Michigan	1897	61 $\frac{1}{2}$ %	F.
Bowdoin Medical College, Maine...	1901	71 $\frac{1}{2}$ %	F.
University of Louisville, Kentucky	1875	77 $\frac{1}{2}$ %	C.
Barnes Medical College, Missouri...	1897	80 $\frac{1}{2}$%	.....
Chicago Medical College, Illinois...	1869	60 $\frac{1}{2}$ %	F.
Hahn Medical College, Illinois.....	1802	.....	†
" " " ".....	1884	72	†
" " " ".....	1903	83 $\frac{1}{2}$%	.....
" " " ".....	1903	80 $\frac{1}{2}$%	.....
" " " ".....	1903	76 $\frac{1}{2}$ %	C.
" Hospital " ".....	1891	73 $\frac{1}{2}$ %	F.
John A. Creighton Med. Col., Omaha	1900	78 $\frac{1}{2}$%	.....
University of Niagara, N. Y.....	1898	77 $\frac{1}{2}$%	.....
Baltimore Medical School, Md.....	1902	82 $\frac{1}{2}$%	.....
State University of Iowa.....	1883	70 $\frac{1}{2}$ %	F.
University of Buffalo, N. Y.....	1899	80 $\frac{1}{2}$%	.....
" Louisville, Ky.....	1892	72 $\frac{1}{2}$ %	F.
" City of New York ...	1886	71 $\frac{1}{2}$ %	F.
Hahn Hospital College, S. F.....	1901	71 $\frac{1}{2}$ %	F.
Northwestern University, Ill.....	1902	87 $\frac{1}{2}$%	.....
" " " ".....	1902	84 $\frac{1}{2}$%	.....
Rush Medical College, Chicago.....	1869	79 $\frac{1}{2}$%	.....
" " " ".....	1893	83 $\frac{1}{2}$%	.....
" " " ".....	1894	66	F.*
" " " ".....	1897	73 $\frac{1}{2}$ %	F.
" " " ".....	1903	84 $\frac{1}{2}$%	.....
University of Michigan.....	1864	69 $\frac{2}{3}$ %	F.
" " " ".....	1890	71 $\frac{1}{2}$ %	F.
" " " ".....	1868	80 $\frac{1}{2}$%	.....
" Pennsylvania.....	1884	74 $\frac{1}{2}$ %	F.
" " " ".....	1900	85 $\frac{1}{2}$%	.....
" " " ".....	1891	75 $\frac{1}{2}$%	.....

† Previously conditioned.

* Took one examination only.